

Case Management Bridge Crossings

Bridging the Chasms of Case Management . . . making it a reality

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*Last issue of Bridge Crossings featured three phrases from the case manager's "patois": health continuum, continuity of care, and continuum of care. This issue highlights three acronyms of processes that impact all three: **LOD, MEB, and PEB**." Case management of the Active Duty Service Member (ADSM) involves coordinating care throughout the continuum and ensuring continuity of care that may be affected by military requirements for Line of Duty investigations, Medical Evaluation, Boards and Physical Evaluation Boards.*

Line of Duty (LOD) investigations are conducted when a Service Member sustains an injury, often traumatic and/or accidental, or acquires a disease while on active duty. While trauma and accidents tend to be the "trigger", these circumstances are not all inclusive. The purpose of the LOD investigation is to answer three primary questions. Did the member's injury or disease

occur while performing military duty in a duty status? If the injury or disease did not occur in a duty status, was it aggravated by military duty? Was the occurrence or aggravation due to the ADSM intentional misconduct or willful negligence? The LOD determination may impact the member financially and/or administratively. Another consideration for ADSM injuries/illnesses is disability. DoD Instruction 1332.38 provides guidelines for medical conditions and physical defects that prompt referral into the Disability Evaluation System -- the MEB and PEB.

Medical Evaluation Board (MEB) The DoD instruction requires that any condition that appears to significantly interfere with performance of duties appropriate to a services member's, office, grade, rank or rating will be considered for an MEB. The process is to identify members whose physical or mental qualifications for full duty is in doubt or whose physical or mental limitations preclude return to full duty within a reasonable time period.

Physical Evaluation Board (PEB) is a fact-finding body that investigates the nature, origin, degree of impairment and probable permanence of the physical or mental defect or condition of any member whose case it evaluates.

The PEB consists of an informal PEB and a formal PEB and relies heavily on information from the MEB. If the board finds a member unfit for continued service, it recommends appropriate disposition based on degree of impairment by the condition and other intervening factors. In summary, a LOD inquires about member's role in an injury or illness; an MEB speaks to the degree to which a member can perform their duties; while the PEB speaks to the member's fitness for continued service in the military based on limitations identified through the MEB process

Implications for Case Management are significant when coordinating care for the ADSM. The purpose of the MEB and PEB is the same for Army, Air Force, and Navy. However, differences exist in procedural guidance for timelines, documentation, and board locations. These differences require a basic understanding of the terms and a ready access to Service-specific procedures to case manage the ADSM. The CM activities include:

- * Assessing injury/illness to assist medical provider in collecting complete and accurate information
- * Planning for anticipated barriers to timely services and treatment; knowing Service-specific rules
- * Implementing systematic communication with the health care team and the patient early
- * Coordinating ancillary, diagnostic, and/or specialty care throughout the continuum of care
- * Monitoring continuity of care through the MTF and network, patient progress, and follow-up
- * Evaluating patient progress toward clinical and functional goals; supporting disability process

Military case managers should become familiar with Service-specific procedures for LOD, MEB, and PEB and understand the important role for assisting the health care team while serving as the patient advocate. The CM process provides a systematic way to reduce fragmentation, avoid delays, and educate the service member! ☼



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<http://www.e-publishing.af.mil/>

<http://www.wramc.army.mil/departments/MEB/Index.htm>

http://ned.s.nebt.daps.mil/1850_4e.htm

Next issue will feature the last group of terms... for now. Integrated care management, catastrophic case management, population-based case management are terms that reflect the role of the case manager in various clinical settings.